

U. S. NAVY BASIC ELIGIBILITY REQUIREMENTS WORKSHEET (OFFICER/ENLISTED)

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 133, 275, 503, 504, 508, 510, 672, 1071-1087, 1168, 1169, 1475-1480, 1553, 5013; and E.O. 9397 (SSN).

PRINCIPAL PURPOSES: To provide recruiters with information concerning personal history, education, professional qualifications, mental aptitude, and other individualized items which may influence the decision to select or non-select an individual for enlistment or commission in the U.S. Navy, to provide historical data for comparison of current applicants with those selected in the past, and to provide delayed entry personnel with training modules and allow DON officials to use the Navy Applicant Management Information System (NAMIS) to conduct surveys and administer on-line screening tool that identify whether the delayed entry personnel qualify for special operations programs and other high-priority programs.

ROUTINE USES: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: To officials and employees of other departments and agencies of the Executive Branch of government, upon request, in the performance of their official duties related to the management of quality military recruitment and the recruitment of Merchant Marine personnel, and to other departments and agencies of the Executive Branch of government in the performance of their official duties related to the management of quality military recruitment as published in the Federal Register.

DISCLOSURE: Disclosure is voluntary, however, failure to provide the requested information may preclude application and enlistment in the U.S. Navy.

FOR OFFICIAL USE ONLY - PRIVACY SENSITIVE

Name (Last, First, Middle):					SSN:		
Address:							
Home Phone:			Work Phone:			Cell Phone:	
Email Address:							
Age:		DOB:		Race:		Ethnicity:	
Occupation:			U.S. Citizen: (Yes/No)		Marital Status:		Children:
High School/College:			Major:			GPA:	
Graduation Date:				Program Interest:			
Prior Military Service: (Yes/No)					Branch:		
Activities/Community Involvement:							
Medical Information	Ht:	Wt:	Vision:	Asthma:	Head Trauma:		Seizure:
High BP:		Diabetes:		Heart DZ:		Cancer:	Drug/Alcohol Rehab:
Psych:			Surgery:			Current Meds:	
Medical Comments:							

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Continued

Financial Issues:

Police Record:

Drug Usage:

Tattoos:

Qualified:

Yes / No

Waiver Required: Yes / No

Discovery (Wants/Needs)

Pressures, Plans & Problems
(Opportunities)

Advantages / References / Unique Value / Objections